U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

		SECTION	ON A - PROPER	TY INFORM	IATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name	FAHERTY	#2016-212				Policy Number:
A2. Building Street Address 419 NORTH BEACH BOULI	(including Apt. EVARD	, Unit, Suite, and/or Blo	dg. No.) or P.O. Ro	ute and Box N	lo.	Company NAIC Number:
City WAVELAND			State MS	ZIP Code 3	39576	
A3. Property Description (Le PARCEL #: 161F-0-02-022.0	ot and Block Nu 003	ımbers, Tax Parcel Nur	mber, Legal Descri	otion, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 30-17-16 Long89-21-43 Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 6 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade NONE c) Total net area of flood openings? ☐ Yes ☒ No d) Engineered flood openings? ☐ Yes ☒ No						
	SECT	TION B – FLOOD IN	SURANCE RAT	MAP (FIR	M) INFORMATIO	N
B1. NFIP Community Name WAVELAND 285262	& Community N		2. County Name ANCOCK			B3. State MS
B4. Map/Panel Number 28045C 0361	B5. Suffix D	B6. FIRM Index Date 10/16/09	B7. FIRM Effective/Re 10/16	vised Date	B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B12. Is the building located in	B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No Designation Date: ☐ CBRS ☐ OPA					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: SLV13,1970						
Datum used for building e	levations must	be the same as that us	ed for the BFE.		Check	the measurement used.
 a) Top of bottom floor (inc b) Top of the next higher f c) Bottom of the lowest ho d) Attached garage (top of e) Lowest elevation of mac (Describe type of equip 	loor rizontal structul slab) chinery or equip	ral member (V Zones o	nly)	8.0 27.7 25.4 N/A 27.4		□ meters □ meters □ feet □ meters □ meters □ feet □ meters □ feet □ meters □ feet □ meters
f) Lowest adjacent (finished)g) Highest adjacent (finished)h) Lowest adjacent grade	ed) grade next	to building (HAG)	cluding structural s	7.3 7.4 upport 7.3		⊠ feet
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No						
Certifier's Name JASON P. CHINICHE License Number P.E. 19732					-10	
Title PROJECT MANAGER			MES J. CHINICHE,			19732
Address 412 HWY, 90, SUIT	TE 2	City BAYST LOUIS	State	MS ZIP	2nde 39520	100

Signature

Telephone (228) 467-6755

Date 07/13/16

LLLVATION OLIVINIOAIL, P	aye 4				
IMPORTANT: In these spaces, of	copy the corresponding information from	Section A.		FOR INSURANCE COMPANY USE	
Building Street Address (including Apt 419 NORTH BEACH BOULEVARD	., Unit, Suite, and/or Bldg. No.) or P.O. Route and	Box No.		Policy Number:	
City WAVELAND	State MS	ZIP Code 39	576	Company NAIC Number:	
SECTION	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)				
Copy both sides of this Elevation Cert	ificate for (1) community official, (2) insurance age	nt/company,	and (3) building or	wner.	
Comments NOTE: The description in A3. above is for information only & not to certify the building location. The Base Flood Elevaton (BFE) is per map in section B4. Recommend verification of (BFE) by local building official. The flood zone is determined by graphic plotting only. Owner is responsible for coordinating this certificate with Contractor and/or Building Official as needed. Sec C2.e) Equipment is an A/C condenser on cantelevered platform.					
	0				
Signature Sauchet	Date)7/13/16			
SECTION E – BUILDING ELE	VATION INFORMATION (SURVEY NOT RI	QUIRED) I	FOR ZONE AO	AND ZONE A (WITHOUT BFE)	
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is					
	Unknown. The local official must certify this info			IEICATION	
SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.					
Property Owner's or Owner's Authorize	ed Representative's Name				
Address	City		State	ZIP Code	
Signature	Date		Telepho	one	
Comments					
				[Oh and have 16 all a share s	
				Check here if attachments	
	SECTION G - COMMUNITY INFORM	W. BOSINE WAR COMMISSION OF THE PARTY OF THE			
The local official who is authorized by law of this Elevation Certificate. Complete the	or ordinance to administer the community's floodpl applicable item(s) and sign below. Check the mea	ain managen surement use	nent ordinance can d in Items G8–G10	n complete Sections A, B, C (or E), and G 0. In Puerto Rico only, enter meters.	
The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)					
A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.					
G3. The following information (Iten	ns G4–G10) is provided for community floodplain	management 	purposes.		
G4. Permit Number	G5. Date Permit Issued	G6. Date (Certificate Of Com	pliance/Occupancy Issued	
G7. This permit has been issued for:	☐ New Construction ☐ Substantial Imp	rovement			
68. Elevation of as-built lowest floor (in		☐ feet	☐ meters	Datum	
BFE or (in Zone AO) depth of flood	ing at the building site:	☐ feet	☐ meters	Datum	
G10. Community's design flood elevation	n:	☐ feet	☐ meters	Datum	
Local Official's Name	Title				
Community Name	Tele	phone			
Signature	Dat	e			
Comments				☐ Check here if attachments	

419 NORTH BEACH BOULEVARD

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

FOR INSURANCE COMPANY USE

Policy Number:

City WAVELAND

State MS

ZIP Code 39576

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



07/13/16 Front View



07/13/16 Rear View

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9

OMB No. 1660-0008 Expiration Date: July 31, 2015

3	important: Read	the instructions of	n pages 1–9.	Схріга	ation bate. July 51, 2015
				FORI	NSURANCE COMPANY USE
A1. Building Owner's Name FAHERTY				Policy	Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 419 NORTH BEACH BOULEVARD			Comp	any NAIC Number:	
City WAVELAND		State MS ZIP	Code 39576		
A3. Property Description (Lot and Block Nu PARCEL #: 161F-0-02-022.003	mbers, Tax Parcel Nun	nber, Legal Description,	etc.)		×
 A4. Building Use (e.g., Residential, Non-Ref A5. Latitude/Longitude: Lat. 30-17-16 Lon A6. Attach at least 2 photographs of the build A7. Building Diagram Number 5/2 A8. For a building with a crawlspace or encal Square footage of crawlspace or en 	g. <u>-89-21-43</u> Horizon Iding if the Certificate is losure(s):	ontal Datum: NAD 1 s being used to obtain flo A9.	927 🛛 NAD 1983		
b) Number of permanent flood opening or enclosure(s) within 1.0 foot above c) Total net area of flood openings in A	s in the crawlspace adjacent grade N/	<u>A</u>		nt flood o	penings in the attached garage t grade N/A
	Yes No	=	d) Engineered flood op		☐ Yes ☒ No
SECT	ION B - FLOOD IN	SURANCE RATE MA	P (FIRM) INFORMATI	ON	
B1. NFIP Community Name & Community N WAVELAND 285262		2. County Name ANCOCK		B3. Sta	ate
B4. Map/Panel Number 28045C 0361 B5. Suffix D	B6. FIRM Index Date 10/16/09	B7. FIRM Pan Effective/Revised 10/16/09		В9.	Base Flood Elevation(s) (Zone AO, use base flood depth)
 Indicate elevation datum used for BFE in Is the building located in a Coastal Barrie Designation Date:	r Resources System (C	BRS) area or Otherwise OPA	Protected Area (OPA)?	lo-	☐ Yes
SECTION	C – BUILDING EL		TION (SURVEY REQU	IRED)	
 Building elevations are based on: *A new Elevation Certificate will be required Elevations – Zones A1–A30, AE, AH, A (who below according to the building diagram space of the building diagram space	th BFE), VE, V1–V30, ecified in Item A7. In P Vi itions in items a) throug	the building is complete. V (with BFE), AR, AR/A, uerto Rico only, enter m ertical Datum: NAVD 19 ph h) below. □ NGVD 1	AR/AE, AR/A1–A30, AR/ eters. <u>988</u>	 'AH, AR/A	
			Check		surement used.
a) Top of bottom floor (including basementb) Top of the next higher floor	crawlspace, or enclos	ure floor)	<u>N/A.0</u> N/A .	feet ∫ feet	☐ meters ☐ meters
c) Bottom of the lowest horizontal structura	I member (V Zones on	y)	25.4*	☑ feet	☐ meters
d) Attached garage (top of slab)			<u>N/A</u>		meters
 e) Lowest elevation of machinery or equipm (Describe type of equipment and location 		ing	<u>N/A</u> .		☐ meters
f) Lowest adjacent (finished) grade next to	building (LAG)		<u>7</u> . <u>3</u>		☐ meters
g) Highest adjacent (finished) grade next toh) Lowest adjacent grade at lowest elevation	AND THE RESIDENCE AND THE PROPERTY OF THE PERSON OF THE PE	uding structural support	7.4 N/A	feet ∫ feet	meters meters
					☐ meters
			HITECT CERTIFICAT		and the same of th
This certification is to be signed and sealed be information. I certify that the information on the I understand that any false statement may be Check here if comments are provided or	nis Certificate represent punishable by fine or i	ts my best efforts to inter Imprisonment under 18 t	pret the data available.		SON P. CHINIO
☐ Check here if attachments.		ensed land surveyor?	Yes No		SEAL SEAL
Certifier's Name JASON P. CHINICHE		License Nu	ımber P.E. 19732		W HERE
Title PROJECT MANAGER	Company Name JAN	MES J. CHINICHE, PA, I	NC.		19732
Address 412 HWY. 90, SUITE 11	City BAY ST. LOUIS	State MS	ZIP Code 39520		CE MICEISS
Signature Chin	Date 02/04/16	Telephone	(228) 467-6755		OF MISSIS

		ion from Section /	٩.	FOR INSURANCE COMPANY USI
419 NORTH BEACH BOULEVARD	, Unit, Suite, and/or Bldg. No.) or P.O.	Route and Box No.		Policy Number:
City WAVELAND	State	MS ZIP Code	39576	Company NAIC Number:
SECTION	D – SURVEYOR, ENGINEER, OF	R ARCHITECT CER	RTIFICATION (C	ONTINUED)
Copy both sides of this Elevation Certifi	icate for (1) community official, (2) insu	ırance agent/compan	y, and (3) building o	owner.
Comments NOTE: The description in a section B4. Recommend verification of coordinating this certificate with Contract	(BFE) by local building official. The flo	od zone is determined	by graphic plotting	only. Owner is responsible for
Signature Java Chil	re .	Date 02/04/16		
SECTION E - BUILDING ELEV	/ATION INFORMATION (SURVE	Y NOT REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE
 b) Top of bottom floor (including between the content of the content of	rade, if available. Check the measuren the following and check the appropriate cent grade (LAG). casement, crawlspace, or enclosure) is casement, crawlspace, or enclosure) is cermanent flood openings provided in S of the building is \ \ feet meters //or equipment servicing the building is	e boxes to show whet be boxes to show whet continuous Altems 8 and meter meters ab above or belom fee	Rico only, enter me her the elevation is feet meters feet meters for 9 (see pages 8-bove or below the HAG. t meters accordance with the head is not below the the head accordance with the head in th	ters. above or below the highest adjacer above or □ below the HAG. above or □ below the LAG. of Instructions), the next higher floid he HAG. bove or □ below the HAG.
	F – PROPERTY OWNER (OR OW			TEICATION
The property owner or owner's authorize or Zone AO must sign here. The statem Property Owner's or Owner's Authorized	ents in Sections A, B, and E are correct	ions A, B, and E for Z ct to the best of my kr	one A (without a Flowledge.	EMA-issued or community-issued Bf
Toperty Owner's or Owner's Authorized				
\ddress		City	Ctata	71D OI-
Address		City	State	ZIP Code
Signature		Date	State Teleph	
			227 22 22	
Signature Comments	SECTION G – COMMUNITY	Date INFORMATION (C	Teleph	one ☐ Check here if attachme
Signature	SECTION G – COMMUNITY ordinance to administer the community	Date INFORMATION (Control of the control of the co	Teleph PPTIONAL) nent ordinance can	Check here if attachments
Comments local official who is authorized by law or is Elevation Certificate. Complete the ap The information in Section C was is authorized by law to certify elevation and the complete the ap	SECTION G – COMMUNITY ordinance to administer the community plicable item(s) and sign below. Check taken from other documentation that I vation information. (Indicate the source	INFORMATION (Cast floodplain management used the measurement used the mass been signed and deand date of the elev	DPTIONAL) nent ordinance can d in Items G8–G10 sealed by a license ation data in the C	Check here if attachments area below.)
local official who is authorized by law or is Elevation Certificate. Complete the ap The information in Section C was is authorized by law to certify elev A community official completed S	SECTION G – COMMUNITY ordinance to administer the community plicable item(s) and sign below. Check taken from other documentation that I vation information. (Indicate the source section E for a building located in Zone	INFORMATION (O's floodplain management used has been signed and e and date of the eleven A (without a FEMA-is)	DPTIONAL) nent ordinance can d in Items G8–G10 sealed by a license ration data in the C ssued or community	Check here if attachments area below.)
Signature Comments local official who is authorized by law or is Elevation Certificate. Complete the ap The information in Section C was is authorized by law to certify eleved to the community official completed S The following information (Items (Ite	SECTION G – COMMUNITY ordinance to administer the community plicable item(s) and sign below. Check taken from other documentation that I vation information. (Indicate the source section E for a building located in Zone G4–G10) is provided for community flo	INFORMATION (C's floodplain management use nas been signed and e and date of the elev A (without a FEMA-is odplain management	DPTIONAL) nent ordinance can d in Items G8–G10 sealed by a license ration data in the C ssued or community	Check here if attachments area below.) Complete Sections A, B, C (or E), and the complete Sections A, C (or E), and the complete Sections A, C (or E), and
Signature Comments local official who is authorized by law or is Elevation Certificate. Complete the ap The information in Section C was is authorized by law to certify eleved to the community official completed S The following information (Items (Ite	SECTION G – COMMUNITY ordinance to administer the community plicable item(s) and sign below. Check taken from other documentation that I vation information. (Indicate the source section E for a building located in Zone	INFORMATION (C's floodplain management use nas been signed and e and date of the elev A (without a FEMA-is odplain management	DPTIONAL) nent ordinance can d in Items G8–G10 sealed by a license ration data in the C ssued or community	Check here if attachments area below.)
local official who is authorized by law or is Elevation Certificate. Complete the ap The information in Section C was is authorized by law to certify elevation A community official completed S The following information (Items C) A. Permit Number This permit has been issued for: Elevation of as-built lowest floor (includes FE or (in Zone AO) depth of flooding	SECTION G – COMMUNITY ordinance to administer the community plicable item(s) and sign below. Check taken from other documentation that I vation information. (Indicate the source fection E for a building located in Zone G4–G10) is provided for community flo G5. Date Permit Issued New Construction Substat ding basement) of the building:	INFORMATION (Control of the measurement used the measurement of the elevation of the elevation of the elevation of the measurement of the elevation of the eleva	DPTIONAL) nent ordinance can d in Items G8–G10 sealed by a license ation data in the C sued or community purposes. Certificate Of Con	Check here if attachments area below.) complete Sections A, B, C (or E), and the complete Sections A, C (or E), and the complete Secti
Comments local official who is authorized by law or is Elevation Certificate. Complete the ap The information in Section C was is authorized by law to certify elevation A community official completed S The following information (Items of S4. Permit Number This permit has been issued for: Elevation of as-built lowest floor (included by the community's design flood elevation:	SECTION G – COMMUNITY ordinance to administer the community plicable item(s) and sign below. Check taken from other documentation that I vation information. (Indicate the source fection E for a building located in Zone G4–G10) is provided for community flo G5. Date Permit Issued New Construction Substat ding basement) of the building:	INFORMATION (Construction of the measurement used and date of the elevent and date of the elevent and the measurement of the elevent and date of the e	DPTIONAL) nent ordinance can d in Items G8–G10 sealed by a license ation data in the C sued or community purposes. Certificate Of Con	Check here if attachments area below.) y-issued BFE) or Zone AO. Check here if attachments area below.) pulsassued BFE) or Zone AO. Check here if attachments area below. The pulsassued BFE attachments area below. Check here if attachments area below. The pulsassued attachments area below. Check here if attachments area below. The pulsassued attachments area below. Check here if attachments area below.
Comments local official who is authorized by law or is Elevation Certificate. Complete the ap The information in Section C was is authorized by law to certify elevation and is authorized by law to certify elevation. The following information (Items of S4. Permit Number This permit has been issued for: Elevation of as-built lowest floor (includent BFE or (in Zone AO) depth of flooding and community's design flood elevation: ocal Official's Name	SECTION G – COMMUNITY ordinance to administer the community plicable item(s) and sign below. Check taken from other documentation that I vation information. (Indicate the source fection E for a building located in Zone G4–G10) is provided for community flo G5. Date Permit Issued New Construction Substat ding basement) of the building:	INFORMATION (Control of the measurement used the measurement used the measurement used the measurement used the measurement of the elevation o	DPTIONAL) nent ordinance can d in Items G8–G10 sealed by a license ation data in the C sued or community purposes. Certificate Of Con	Check here if attachments area below.) complete Sections A, B, C (or E), and the complete Sections A, C (or E), and the complete Secti
Comments local official who is authorized by law or is Elevation Certificate. Complete the ap The information in Section C was is authorized by law to certify elevation A community official completed S The following information (Items of S4. Permit Number This permit has been issued for: Elevation of as-built lowest floor (included by the community's design flood elevation:	SECTION G – COMMUNITY ordinance to administer the community plicable item(s) and sign below. Check taken from other documentation that I vation information. (Indicate the source fection E for a building located in Zone G4–G10) is provided for community flo G5. Date Permit Issued New Construction Substat ding basement) of the building:	INFORMATION (Control of the measurement used and date of the elevent as been signed and the and date of the elevent as been signed and the and date of the elevent as been signed and the elevent as been signed as the elevent as	DPTIONAL) nent ordinance can d in Items G8–G10 sealed by a license ation data in the C sued or community purposes. Certificate Of Con	Check here if attachments area below.) complete Sections A, B, C (or E), and the complete Sections A, C (or E), and the complete Secti

ELEVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or BI 419 NORTH BEACH BOULEVARD	dg. No.) or P.O. Route a	and Box No.	Policy Number:	
City WAVELAND	State MS	ZIP Code 39576	Company NAIC Number:	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



02/04/16 Front View Only

Rear View

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660,0009

OND NO. 100	00-0008
Expiration Da	te: July 31, 2015

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE			
A1. Building Owner's Name JOHN FAHERTY	Policy Number:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 419 N.BEACH BLVD	Company NAIC Number:			
City Waveland State MS ZIP Code 39576				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL # (161F-0-02-022.003)				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. N 30-17-16 Long. W 89-21-43 Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 5 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade or enclosure(s) within 1.0 foot above adjacent grade NA c) Total net area of flood openings? Yes No Horizontal Datum: NAD 1927 NAD 1983 Horizontal Datum: NAD 1927 NAD 1983 A9. For a building with an attached garage: a) Square footage of attached garage NA sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade NA c) Total net area of flood openings? NA sq in d) Engineered flood openings? NA So No				
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORM	MATION			
B1. NFIP Community Name & Community Number Waveland 285262 B2. County Name Hancock	B3. State MS			
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel B8. FIC 28045C-0361 D 10-16-09 Effective/Revised Date Zone(10-16-09 VE	s) AO, use base flood depth)			
Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile FIRM Community Determined Other/Source: Other/Source: Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date: NA CBRS OPA				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY RE	EQUIRED)			
Building elevations are based on:				
f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support NA.				
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION				
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify information. I certify that the information on this Certificate represents my best efforts to interpret the data available I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 10 Check here if comments are provided on back of form. Check here if attachments. Were latitude and longitude in Section A provided licensed land surveyor? Yes No Certifier's Name Duke Levy License Number 01722 Title Surveyor Company Name Digital Engineering	elevation le. 201.			
Address 314 Coleman Ave City Waveland State MS ZIP Code 39576	The sun of			
Date 11-20-15 Telephone 228-463-0130	NE OFMESS!			

2016 8307 Verorded in the Above Deed Book & Page 07-12-2016 09:13:33 AM

WAVELAND

NONCONVERSION AGREEMENT Hancack County with

CITY OF WAVELAND, MISSISSIPPI
This DECLARATION made this 19 day of July 206 by John Faherty ("Owner") having an address at
WITNESSETH: WHEREAS, the Owner is the record owner of all that real property located at HIG N. ISLACE BLVD in the City of Waveland, Ms. in the County of Hancock, designated in the Tax Records as WHEREAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base flood elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of the Waveland Floodplain Management Ordinance of Number 342 and under Permit Number 16 1 = 0 -02.03.003
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, and assigns.
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:
The structure or part thereof to which these conditions apply is:
2. At this site, the Base Flood Elevation is VE24 feet above mean sea level, National Geodetic Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
 The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
7. Other conditions:
In witness whereof the undersigned set their hands and seals this day of, 20
Owner (Seal) Owner (Seal) State of Mississippi, County of Hancock Personally appeared before me, the undersigned authority in and for the said county and state,
and state,

my jurisdiction, the within named

who acknowledged that shan above and foregoing instrument.

My Commission Expires Dec. 31, 2013

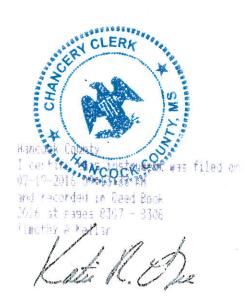
2016 8308 Deed Book & Pase

EXHIBIT "A" (File No.: 1000-43015)

Legal Description

A parcel of land being part of Lot 14, Second Ward, Town of Waveland, Hancock County, Mississippi, and being more particularly described as follows: Commencing at a point where the line between Lots 19 and 21, Second Ward, Town of Waveland, intersects the Northerly margin of Beach Boulevard; thence North 54 degrees 43 minute 41 seconds East along said Northerly margin 451.90 feet to the POINT OF BEGINNING; thence North 45 degrees 30 minutes 44 seconds West 193.43 feet to a point; thence North 44 degrees 23 minutes 50 seconds East 78.87 feet to a point; thence South 44 degrees 30 minutes 44 seconds East 206.96 feet to a point on said Northerly margin of Beach Boulevard; thence South 54 degrees 08 minutes 03 seconds West along said margin 80.00 feet to the POINT OF BEGINNING; containing 0.36 acres, more or less. All as per survey by Duke Levy, Job #10-0333. Being the same property acquired by the Grantor herein in Warranty Deed dated 09/27/10, recorded 09/28/10 in Book 2010, Page 13010 in the office of the Chancery Clerk of Hancock Co., MS.

Indexing Instructions: Pt. Lot 14, 2nd Ward, Waveland, Hancock Co., MS



CELECTED VICTORIA

FLOODPLAIN VENTING AFFIDAVIT City of Waveland

I hereby acknowledge that Lety of	Waveland
Is issuing an Occupancy Certificate for the prope	erty known as: <u>419 N. Beach Blud</u>
161F-0-02-022.003	
under Permit # ℓ	8078
In which required Floodplain Management Ordin inspection performed. At the time of inspection, Access doors used to meet the flood venting requirement must be maintained as flood vents, openings win any way that would no longer allow	ance requirements have been met and a final vents and 36 crawl space uirements of the Ordinance would allow the wledge that all openings designed to meet this and that the elimination or alteration of the the automatic entry and exit of flood waters would. Violations may incur civil penalties and possible eration of the vents could result in greater risk to a flood. Flood insurance claims may be denied,
As witness the hand and seal of the owner	er of the subject property this
19th day of July	
hustu Gallgher WITNESS	X Nohn E Feherty OWNER (please print)
	OWNER'S SIGNATURE